

CLAIMS ONLY	SERIAL NO. _____ FILING DATE _____	
APPLICANT(S) _____		

CLAIMS						
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/					
2		/				
3		/				
4		/				
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49		/				
50		/				
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						

	*	*	*
	IND.	DEP.	IND. DEP. IND. DEP.
51	/		
52		/	
53		/	
54		/	
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98			
99			
100			
TOTAL IND.	20	↓	↓
TOTAL DEP.	47	←	←
TOTAL CLAIMS	67		

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS